

**CLAIM FOR DAMAGE,
INJURY, OR DEATH**

INSTRUCTIONS: Please read carefully the instructions on the reverse side and supply information requested on both sides of this form. Use additional sheet(s) if necessary. See reverse side for additional instructions.

FORM APPROVED
OMB NO. 1105-0008

1. Submit to Appropriate Federal Agency:

Missouri State Highway Patrol
Attn: Colonel Eric T. Olson, Superintendent
1510 East Elm Street Email: moalerts@mshp.dps.mogov
Jefferson City, MO 65102 Fax: (978) 367-8234

2. Name, address of claimant, and claimant's personal representative if any.
(See instructions on reverse). Number, Street, City, State and Zip code.

Thomas Edward Humphrey
12 Summer Street Apt #2
Boston, MA 02129

3. TYPE OF EMPLOYMENT

☐ MILITARY ☐ CIVILIAN

4. DATE OF BIRTH

07/20/1988

5. MARITAL STATUS

S

6. DATE AND DAY OF ACCIDENT

08/05/2021

7. TIME (A.M. OR P.M.)

12:00P.M.

8. BASIS OF CLAIM (State in detail the known facts and circumstances attending the damage, injury, or death, identifying persons and property involved, the place of occurrence and the cause thereof. Use additional pages if necessary).

PLEASE SEE ATTACHMENTS

9. **PROPERTY DAMAGE**

NAME AND ADDRESS OF OWNER, IF OTHER THAN CLAIMANT (Number, Street, City, State, and Zip Code).

BRIEFLY DESCRIBE THE PROPERTY, NATURE AND EXTENT OF THE DAMAGE AND THE LOCATION OF WHERE THE PROPERTY MAY BE INSPECTED.
(See instructions on reverse side).

PLEASE SEE ATTACHMENTS

10. **PERSONAL INJURY/WRONGFUL DEATH**

STATE THE NATURE AND EXTENT OF EACH INJURY OR CAUSE OF DEATH, WHICH FORMS THE BASIS OF THE CLAIM. IF OTHER THAN CLAIMANT, STATE THE NAME OF THE INJURED PERSON OR DECEDENT.

PLEASE SEE ATTACHMENTS

11. **WITNESSES**

NAME

ADDRESS (Number, Street, City, State, and Zip Code)

12. (See instructions on reverse).

AMOUNT OF CLAIM (in dollars)

12a. PROPERTY DAMAGE

\$0.00

12b. PERSONAL INJURY

\$909,333.00

12c. WRONGFUL DEATH

12d. TOTAL (Failure to specify may cause forfeiture of your rights).

\$909,333.00

I CERTIFY THAT THE AMOUNT OF CLAIM COVERS ONLY DAMAGES AND INJURIES CAUSED BY THE INCIDENT ABOVE AND AGREE TO ACCEPT SAID AMOUNT IN FULL SATISFACTION AND FINAL SETTLEMENT OF THIS CLAIM.

13a. SIGNATURE OF CLAIMANT (See instructions on reverse side).

TH UCC 1-308 ARP

13b. PHONE NUMBER OF PERSON SIGNING FORM

617-835-9319

14. DATE OF SIGNATURE

08/04/2023

**CIVIL PENALTY FOR PRESENTING
FRAUDULENT CLAIM**

The claimant is liable to the United States Government for a civil penalty of not less than \$5,000 and not more than \$10,000, plus 3 times the amount of damages sustained by the Government. (See 31 U.S.C. 3729).

**CRIMINAL PENALTY FOR PRESENTING FRAUDULENT
CLAIM OR MAKING FALSE STATEMENTS**

Fine, imprisonment, or both. (See 18 U.S.C. 287, 1001.)

INSURANCE COVERAGE

In order that subrogation claims may be adjudicated, it is essential that the claimant provide the following information regarding the insurance coverage of the vehicle or property.

15. Do you carry accident Insurance? ☐ Yes If yes, give name and address of insurance company (Number, Street, City, State, and Zip Code) and policy number. ☒ No

16. Have you filed a claim with your insurance carrier in this instance, and if so, is it full coverage or deductible? ☐ Yes ☒ No

17. If deductible, state amount.

18. If a claim has been filed with your carrier, what action has your insurer taken or proposed to take with reference to your claim? (It is necessary that you ascertain these facts).

19. Do you carry public liability and property damage insurance? ☐ Yes If yes, give name and address of insurance carrier (Number, Street, City, State, and Zip Code). ☒ No

INSTRUCTIONS

Claims presented under the Federal Tort Claims Act should be submitted directly to the "appropriate Federal agency" whose employee(s) was involved in the incident. If the incident involves more than one claimant, each claimant should submit a separate claim form.

Complete all items - Insert the word NONE where applicable.

A CLAIM SHALL BE DEEMED TO HAVE BEEN PRESENTED WHEN A FEDERAL AGENCY RECEIVES FROM A CLAIMANT, HIS DULY AUTHORIZED AGENT, OR LEGAL REPRESENTATIVE, AN EXECUTED STANDARD FORM 95 OR OTHER WRITTEN NOTIFICATION OF AN INCIDENT, ACCOMPANIED BY A CLAIM FOR MONEY

Failure to completely execute this form or to supply the requested material within two years from the date the claim accrued may render your claim invalid. A claim is deemed presented when it is received by the appropriate agency, not when it is mailed.

If instruction is needed in completing this form, the agency listed in item #1 on the reverse side may be contacted. Complete regulations pertaining to claims asserted under the Federal Tort Claims Act can be found in Title 28, Code of Federal Regulations, Part 14. Many agencies have published supplementing regulations. If more than one agency is involved, please state each agency.

The claim may be filed by a duly authorized agent or other legal representative, provided evidence satisfactory to the Government is submitted with the claim establishing express authority to act for the claimant. A claim presented by an agent or legal representative must be presented in the name of the claimant. If the claim is signed by the agent or legal representative, it must show the title or legal capacity of the person signing and be accompanied by evidence of his/her authority to present a claim on behalf of the claimant as agent, executor, administrator, parent, guardian or other representative.

If claimant intends to file for both personal injury and property damage, the amount for each must be shown in item number 12 of this form.

DAMAGES IN A SUM CERTAIN FOR INJURY TO OR LOSS OF PROPERTY, PERSONAL INJURY, OR DEATH ALLEGED TO HAVE OCCURRED BY REASON OF THE INCIDENT. THE CLAIM MUST BE PRESENTED TO THE APPROPRIATE FEDERAL AGENCY WITHIN TWO YEARS AFTER THE CLAIM ACCRUES.

The amount claimed should be substantiated by competent evidence as follows:

(a) In support of the claim for personal injury or death, the claimant should submit a written report by the attending physician, showing the nature and extent of the injury, the nature and extent of treatment, the degree of permanent disability, if any, the prognosis, and the period of hospitalization, or incapacitation, attaching itemized bills for medical, hospital, or burial expenses actually incurred.

(b) In support of claims for damage to property, which has been or can be economically repaired, the claimant should submit at least two itemized signed statements or estimates by reliable, disinterested concerns, or, if payment has been made, the itemized signed receipts evidencing payment.

(c) In support of claims for damage to property which is not economically repairable, or if the property is lost or destroyed, the claimant should submit statements as to the original cost of the property, the date of purchase, and the value of the property, both before and after the accident. Such statements should be by disinterested competent persons, preferably reputable dealers or officials familiar with the type of property damaged, or by two or more competitive bidders, and should be certified as being just and correct.

(d) Failure to specify a sum certain will render your claim invalid and may result in forfeiture of your rights.

PRIVACY ACT NOTICE

This Notice is provided in accordance with the Privacy Act, 5 U.S.C. 552a(e)(3), and concerns the information requested in the letter to which this Notice is attached.

A. **Authority:** The requested information is solicited pursuant to one or more of the following: 5 U.S.C. 301, 28 U.S.C. 501 et seq., 28 U.S.C. 2671 et seq., 28 C.F.R. Part 14.

B. **Principal Purpose:** The information requested is to be used in evaluating claims.

C. **Routine Use:** See the Notices of Systems of Records for the agency to whom you are submitting this form for this information.

D. **Effect of Failure to Respond:** Disclosure is voluntary. However, failure to supply the requested information or to execute the form may render your claim "invalid."

PAPERWORK REDUCTION ACT NOTICE

This notice is solely for the purpose of the Paperwork Reduction Act, 44 U.S.C. 3501. Public reporting burden for this collection of information is estimated to average 6 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the Director, Torts Branch, Attention: Paperwork Reduction Staff, Civil Division, U.S. Department of Justice, Washington, DC 20530 or to the Office of Management and Budget. Do not mail completed form(s) to these addresses.

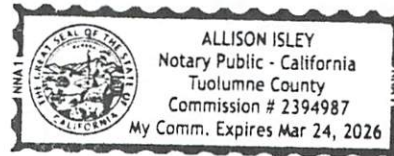
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IN CLERKS OFFICE**CALIFORNIA JURAT**

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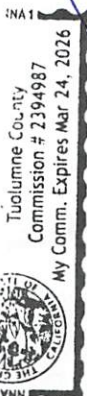
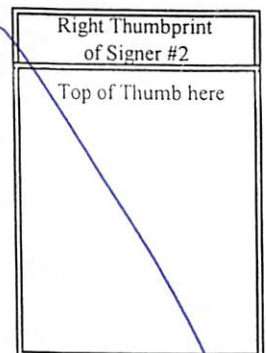
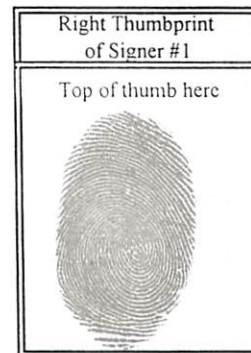
A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

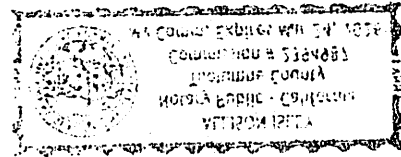
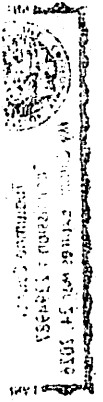
STATE OF CALIFORNIA

COUNTY OF TUOLUMNE

Subscribed and sworn to (or affirmed) before me on this 4th day of August, 2023by Thomas Edward Humphren proved to me on the basis of satisfactory evidence to be the person(s) who appeared before me.Signature Allison Isley (Seal)**OPTIONAL**

Though the information in this section is not required by law, it may prove valuable to persons relying on the document and could prevent fraudulent removal and reattachment of this form to another document.

DESCRIPTION OF ATTACHED DOCUMENTTitle or Type of Document: Basis of ClaimDate of Document: August 4, 2023Number of Pages: 2 (including jurat)Signer(s) other than named above: N/A



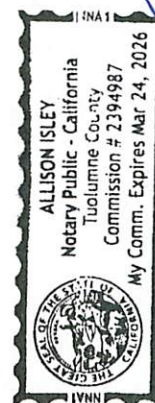
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BASIS OF CLAIM

August 5, 2021 at approximately 11:30 a.m. I was woken up by an Ava Police Department officer while parked on the east side of the parking lot of the Walmart in the city of Ava (1309 NW 12th Ave, Ava MO 65608). Walmart had called the police requesting them to ask me to leave and inform me that they do not allow overnight parking. So I immediately complied, hopped in the drivers' seat and followed the officer out of the parking lot headed east on Springfield Rd. As I crossed the intersection of Springfield Road and MO-5, Cpl. Daniel Johnson was headed north on MO-5 and pulled right behind me and immediately turned on his emergency lights initiating an unlawful traffic stop. Cpl. Daniel Johnson immediately demanded me to get out of my car and told me I was under arrest. By Approximately 11:45 a.m. I was being assaulted and violently ripped out of my van/dwelling and was unlawfully arrested and bound in handcuffs. Due to Cpl. Daniel Johnson violently assaulting me, I suffered soft tissue and muscle injury with bruising and swelling to my left arm. I was taken to the Douglas County Jail by Cpl. Daniel Johnson and was left sitting on a bench in the booking area bound in handcuffs for approximately 3 and a half hours. Cpl. Daniel Johnson left me in booking before processing me, to go illegally search my van/dwelling and have it towed. The moment the handcuffs were removed I asked what time it was and I was told it was 20 minutes to 5. I said "will you please tell me the exact time?" and I was told it was 4:39 a.m.. That means I was in handcuffs for nearly 5 hours. I made sure to make a mental note of the exact time so that I could accurately calculate the damages in this claim. **A signed warrant must be present for an arrest to take place or a criminal act with an injured party.** I was released from the Douglas County Jail at 5:15 p.m. with no shirt or shoes. I then proceeded to walk 2.1 miles from the Douglas County Jail (900 Industrial Rd, Ava, MO 65708) to Jim's Body Shop (1306 S Jefferson St, Ava MO 65608) where my van was towed to. This caused blistering on the soles of my feet. By the grace of God there was someone there after hours that allowed me to get some clothes and my boots and a few valuables. I was forced to go without my daily necessities and sacred items that I keep in my van/dwelling. I was forced to eat meals outside and struggled to arrange where I was going to sleep for the four nights I was displaced from my dwelling.

Monetary Damages Owed

\$100,000 for unwarranted arrest and detention in handcuffs. \$480,000 for 4 hours illegally detained in handcuffs. \$35,000 for 35 minutes illegally detained in Douglas County Jail. \$18,000 for soft tissue injury; \$6,000 pain and suffering caused by injury. \$10,000 for walking 2.1 miles with no shoes; \$3,333 for pain and suffering caused by injury. \$7,000 for vehicle tow and storage for 5 days. \$250,000 (\$50,000 per day) for pain and suffering caused by the displacement and deprivation of my dwelling and cherished sacred items.

Total monetary damages caused by the criminal negligence of Cpl. Daniel Johnson (Badge #0439) Total: \$909,333

Signature TH UCC 1-308ARR 08/04/2023

I, _____, State of California County of _____, Subscribed and affirmed before me on his _____ day of _____, 20____, by _____, proved to me on the basis of satisfactory evidence to be the person who appeared before me.

Signature _____

See attached
jurat w/

(Seal)



Thomas Humphrey <thomasehumphrey@gmail.com>

Point of correction

Thomas Humphrey <thomasehumphrey@gmail.com>

Thu, Jan 11, 2024 at 10:09 AM

To: mshppied@mshp.dps.mo.gov, psdmail@mshp.dps.mo.gov, dpsinfo@dps.mo.gov, cpinfo@dps.mo.gov, sacmail-email@mshp.dps.mo.gov, ruralcrimes@mshp.dps.mo.gov, Kenneth.M.Robinson@mshp.dps.mo.gov, jeff.coulson@mshp.dps.mo.gov, cindy.scheidt@mshp.dps.mo.gov
Cc: policechief@avamissouri.org

I submitted claim form SF-95 August 4, 2023. 28 U.S.C. § 2675(a) allots your agency 6 months to administratively adjudicate my claim. If disposition is not received by February 5, 2024, I will be initiating civil action in Federal Court against the Missouri State Highway Patrol for substantive rights violations.

Respectfully,

Thomas Edward Humphrey

On Thu, Jan 11, 2024, 9:28AM Thomas Humphrey <thomasehumphrey@gmail.com> wrote:

Video Evidence.mp4

28 U.S. Code § 2675 Disposition by federal agency as prerequisite; evidence

Attn. Colonel Eric T. Olson,

I submitted a claim to your agency for damages that resulted from an incident with MSHP that occurred August 5, 2021 at approximately 11:45 a.m.. I have yet to receive acknowledgement confirming receipt or requesting additional information.

Please be advised the applicable provisions of the Federal Tort Claims Act [28 U.S.C. §§ 1346(b), 2401(b), 2671, et seq.] provide for the payment of claims which arise from the negligent or wrongful act or omission of an employee of the Federal Government while acting within the scope of his or her employment, under circumstances where the United States, if a private person, would be liable to the claimant in accordance with the law of the place where the act or omission occurred.

The FTCA affords the Government six months from the date a completed tort claim is received by the responsible federal agency, to administratively adjudicate the claim before a claimant can institute a civil action [28 U.S.C. § 2675(a)].

Please inform me of the current status of my claim at your earliest convenience. If I do not receive disposition from your agency by August 6th, I will be initiating civil action in Federal Court against the Missouri State Highway Patrol for substantive rights violations.

Respectfully,

Thomas Edward Humphrey

Legal notice served to Captain John J. Hotz of MSHP 09/17/2021:

<https://www.facebook.com/100010635219468/videos/912365353589123>
<https://www.instagram.com/p/CxWXQWOSg4Y/>

Missouri State Highway Patrol incident 08/05/2021:

https://drive.google.com/drive/folders/11DdQsnw0IBOLGkpwqmE6A6ww4ItQIXC_?usp=drive_link

On Sat, Aug 5, 2023 at 1:21 PM Thomas Humphrey <thomasehumphrey@gmail.com> wrote:

Attn. Colonel Eric T. Olson

2024 FEB -5 PM 12:30
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I am seeking compensatory damages for personal injury caused by the tortious conduct of the Missouri State Highway Patrol.

respondeant superiores: "that the masters must answer"

Respectfully,

Thomas Humphrey
thomasehumphrey@gmail.com
617.835.9319

Please see attachments found in Google folders below as they pertinent evidence required for you to process my claim.

https://drive.google.com/drive/folders/11DdQsnw0IBOLGkpwqmE6A6ww4ltQIXC_?usp=drive_link

https://drive.google.com/drive/folders/1WIBksFixw_y_C3ehnttO_RO5icR2f1bZ?usp=drive_link

Missouri State Highway Patrol Incident

Initial removal of government issued license plates 02/20/2021 ~Act of Faith and Courage~

https://www.facebook.com/permalink.php?story_fbid=pfbid02cvVFBKuLifChud9ZgUDkpHwyvD4SiY3jEGxNeYN7gXcvVycsTQjj1x4LK6sPAr56l&id=100010635219468

1. <https://www.instagram.com/p/CLkbGuMhosN/>
2. <https://www.instagram.com/p/CLkbZclBe15/>

Official notice to, and welcome by, the Ava Police Department 06/23/2021

<https://www.facebook.com/100010635219468/videos/1453232525041241>

<https://www.instagram.com/p/CQd-EXLgoiJ/>

Returned to Ava Missouri from California 07/20/2021

https://www.facebook.com/permalink.php?story_fbid=pfbid0DfCTXph5z3RbnKNfcq5SV3y5xNS9MGfmvSTYPAFikBgCfbTwq2QbfFtcoZfGLYgml&id=100010635219468

1. <https://www.instagram.com/p/CRkwsSigsHM/>
2. <https://www.instagram.com/p/CRkzJYKA5-d/>

Instagram Live Video: Removal of government issue license plates 07/22/2021

<https://www.instagram.com/p/CRpzQJfgTH8/>

Office Duarte of the Ava Police Department checking up on me 07/24/2021

<https://www.facebook.com/100010635219468/videos/901784030683171/>

<https://www.instagram.com/p/CRvY59zgKci/>

Cpl. Daniel Johnson (Badge #0439) - Assault and Battery 08/05/2021

<https://www.facebook.com/100010635219468/videos/543016363483554/>

<https://www.instagram.com/p/CSOWCfwAy7d/>

<https://photos.app.goo.gl/8o7uMg9a5MXUDZZ38>

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Your fax has been sent successfully!

Date: Fri 04-Aug-2023 20:17:22 PDT

Phone Number: 9783678234

Images Scanned: 6

Fax Id: e66cbf0e-9e9b-4a79-a43b-1414bcb91957

Status: SUCCESS

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MISSOURI STATE HIGHWAY

ABOUT

CAREERS

SERVICES

CONTACT US

If this is an emergency please dial: 1-800-525-5555 or on cell phone: *55

General Headquarters

General Headquarters

1510 East Elm Street
P.O. Box 568
Jefferson City, MO 65102
Telephone: (573) 751-3313
Fax: (978) 367-8234

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Academy Building

1510 East Elm Street
P.O. Box 568
Jefferson City, MO 65102
Telephone: (573) 526-6174
Fax: (573) 751-6627

Annex Building

1510 East Elm Street



Your fax has been sent successfully!

Date: Fri 04-Aug-2023 20:12:08 PDT

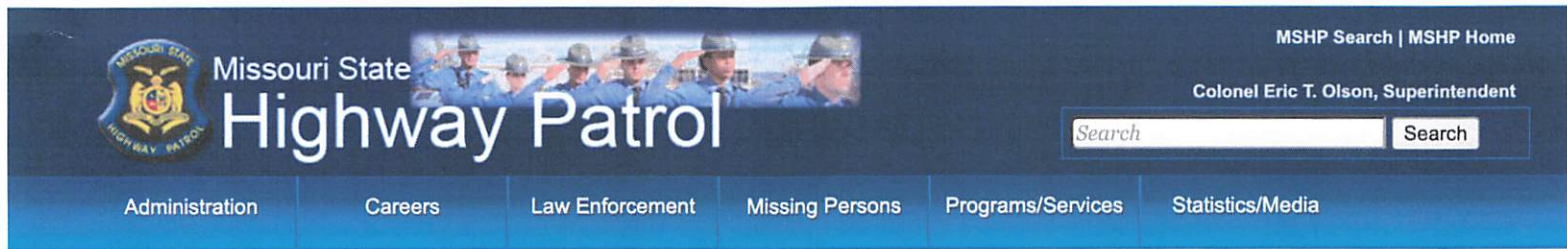
Phone Number: 9782448919

Images Scanned: 6

Fax Id: 0b1acd94-180b-4f70-8a0c-0c7aa05152d9

Status: SUCCESS

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Professional Standards Division-History

The primary function of the Professional Standards Division is to ensure the integrity of the Missouri State Highway Patrol and its personnel through a comprehensive and objective process of investigating allegations of employee misconduct.

The Missouri State Highway Patrol is committed to serving and protecting all people by enforcing laws and delivering quality services which help ensure Missouri is a safe place to live or visit. The Professional Standards Division is the guardian of the agency's reputation and strives to be fair and impartial in all aspects of the investigation process. In that respect, members assigned to the division are dedicated to the goal of properly responding to all allegations of misconduct.

Commendations

The Missouri State Highway Patrol welcomes citizen input regarding the actions or professionalism of our employees. If a Patrol employee has provided excellent service to you, please let us know.

Complaints

The Missouri State Highway Patrol is interested in the welfare of all persons and in taking action where its employees have neglected their duties. Citizens initiating misconduct complaints can be assured their complaint will be given a thorough and fair investigation.

Complaint Procedures

(SHP-877) This brochure explains your rights and the procedures you can take if you feel an employee of the Patrol has mistreated you in any manner.

How to Contact Us

If you have a commendation or complaint you may contact the Professional Standards Division at (573) 751-8801, e-mail us at psdmail@mshp.dps.mo.gov or write to us at:

Missouri State Highway Patrol
Professional Standards Division
P.O. Box 568
Jefferson City, MO 65102-0568

Staff

Division Director

Captain Kirk A. Davis

Investigators

Lieutenant John W. Dick

Lieutenant Scott B. White

Lieutenant Joseph A. Veasman

Special Assistant

Jennifer J. Canaday

Contact Info

Phone: (573) 751-8801

Fax: (978) 244-8919

Professional Standards Frequently Asked Questions

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